FORM DEC Wall Processing Section

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

Washington, DC

SEP 122008

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

1495919

OMB APPROVAL

OMB Number: 32350076

Expires: Sept. 30, 2008 Estimated average burden hours

per response: 16.00

SEC USE ONLY									
Prefix		Serial							
DA	TE RECEIV	ED							

Name of Offering () check if this is an amendment		nged, and indicate c	hange.)		·
Units of common shares and common share purch	base warrants				
Filing Under (Check box(es) that apply):	Rule 504	Rule 505	X Rule 506	☐ Section 4(6) ULOE
Type of Filing: New Filing	Amendment			I III AIII PAGE IAIII	
	A. BASIC IDENT	IFICATION DA	TÁ		
1. Enter the information requested about the issuer				111111111111111111111111111111111111111	
Name of Issuer () check if this is an amendm Carbon Friendly Solutions Inc. (formerly Avigo F		inged, and indicate of	change.)	80	059944
Address of Executive Offices	(Number and S	Street, City, State, Z	ip Code)	Telephone Area Code)	Number (Including
Suite 1304, 925 West Georgia Street, Vancouver,	British Columbia, C	anada, V6C 3L2		604-684-218	31
Address of Principal Business Operations (if different from Executive Offices)	(Number and S	Street, City, State, Zi	ip Code)		Number (Including ROCESSED
Brief Description of Business				812	SEP 182008
Clean technology company generating carbon cre	dits for sale in volun	itary and complian	ice markets.	-	-
Type of Business Organization Corporation business trust	. ·	ship, already forme	d	□ THO	OMSON REUTERS blease specify):
Actual or Estimated Date of Incorporation or Organiz		onth 06	Year 97	⊠ Actual	☐ Estimated
Jurisdiction of Incorporation or Organization:		U.S. Postal Service ther foreign jurisdic	Abbreviation for Station)	ite: CN for	CN

GENERAL INSTRUCTIONS

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of
 the issuer;

Each executive officer and dEach general and managing	•		eneral and managing par	tners of partnersh	ip issuers; and
Check Box(es) that Apply:	Promoter	☐ Beneficial owner	Executive Officer	X Director	General and/or Managing partner
Full Name (Last name first, if indivi	dual)				
Lis, Stan					· · · · · · · · · · · · · · · · · · ·
Business or Residence Address (Nur	mber and Street, Cit	y, State, Zip Code)			
2101 - 535 Nicola Street, Vancouv	er, British Columb	ia, Canada, V6G 3G3			
Check Box(es) that Apply:	Promoter	Beneficial owner	Executive Officer	X Director	General and/or Managing partner
Full Name (Last name first, if indivi	dual)				
Young, Michael					
Business or Residence Address (Nur	mber and Street, City	y, State, Zip Code)			
301 - 3962 Pender Street, Burnab	y, British Columbia	a, Canada, V5C 2L6			
Check Box(es) that Apply:	Promoter	Beneficial owner	Executive Officer	➤ Director	General and/or Managing partner
Full Name (Last name first, if indivi	dual)				
Varshney, Hari	•				
Business or Residence Address (Nur		•			
Suite 1304, 925 West Georgia Stre	et, Vancouver, Bri	tish Columbia, Canada,	V6C 3L2		
Check Box(es) that Apply:	☐ Promoter	Beneficial owner	Executive Officer	X Director	General and/or Managing partner
Full Name (Last name first, if indivi	dual)				
Varshney, Peeyush					
Business or Residence Address (Nur	mber and Street, City	y, State, Zip Code)			
Suite 1304, 925 West Georgia Stre	et, Vancouver, Brit	tish Columbia, Canada,	V6C 3L2		
Check Box(es) that Apply:	Promoter	☐ Beneficial owner	Executive Officer	X Director	General and/or Managing partner
Full Name (Last name first, if indivi-	dual)				
Driedger, David					
Business or Residence Address (Nur	nber and Street, City	y, State, Zip Code)	-		
400 Garden Avenue N., Brantford	, Ontario, Canada,	N3T 5M1			
Check Box(es) that Apply:	Promoter	Beneficial owner	☐ Executive Officer	Director	General and/or Managing partner
Full Name (Last name first, if indivi-	dual)				
Smulewicz, Slawomir					
Business or Residence Address (Nur Warsaw 01-529, Kaniowska 5 Stre	· · · · · · · · · · · · · · · · · · ·	y, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial owner	☐ Executive Officer	Director	General and/or Managing partner
Full Name (Last name first, if individual	dual)				<u> </u>
Business or Residence Address (Nur	nber and Street, City	y, State, Zip Code)			

Name Name
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?
2. What is the minimum investment that will be accepted from any individual?
3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agein of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only Full Name (Last name first, if individual) None Business or Residence Address (Number and Street, City, State, Zip Code) States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MC] [MT] [NE] [NV] [NH] [NV] [NH] [NV] [NV] [NC] [ND] [ND] [OK] [OR] [PA] [MT] [NE] [NV] [NH] [NV] [NV] [NV] [NV] [NV] [NV] [NV] [NV
3. Does the offering permit joint ownership of a single unit?
or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only Full Name (Last name first, if individual) None Business or Residence Address (Number and Street, City, State, Zip Code) States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MC] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [ND] [OK] [OR] [PA [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WA] [WA] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)
Name of Associated Broker or Dealer: States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer: States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)
Name of Associated Broker or Dealer: States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)
(Check "All States" or check individual States) □ All States [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MC] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [ND] [OK] [OR] [PA [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WA] [WI] [WY] [PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)
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[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WA] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)
Business or Residence Address (Number and Street, City, State, Zip Code)
Name of Associated Broker or Dealer:
·
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MC] [MT] [NE] [NV] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [ND] [OK] [OR] [PA
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [ND] [OK] [OR] [PA [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WA] [WI] [WY] [PR]
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Name of Associated Broker or Dealer:
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] · [FL] [GA] [HI] [ID]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MC
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [ND] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WA] [WI] [WY] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

⁽¹⁾ All solicitations within the United States were made by Westminster Securities Corporation.

C. OFFERING PRICE, NUMBER OF INVESTORS, EX	XPENSES AN	D USE OF PROCE	EEDS	
 Enter the aggregate price of securities included in this offering and the total amo transaction is an exchange offering, check this box 0 and indicate in the column already exchanged. 				
		Aggregate		Amount Already
Type of Security	_	Offering Price	_	Sold
Debt			\$	
Equity	\$	10,000	\$	10,000
☐ Common ☐ Preferred				
Convertible Securities (including warrants)		7,500 (1)	\$	0
Partnership Interests			\$	·
Other (Specify)			\$	
Total	\$	17,500	\$	10,000
their purchases. For offerings under Rule 504, indicate the number of persons whetheir purchases on the total lines. Enter "0" if answer is "none" or "zero."	no nave purcha	Number Investors	e aggre	Aggregate Aggregate Dollar Amount of Purchases
Accredited Investors		1	\$	10,000
Non-accredited Investors	*********	0	\$	0
Total (for filings under Rule 504 only)		•	\$	
Answer also in Appendix, Column 4, if filing under UI	OE			
 If this filing is for an offering under Rule 504 or 505, enter the information requ the types indicated, in the twelve (12) months prior to the first sale of securitie Question 1. Type of offering 				
Rule 505		Security	\$	5010
Regulation A			\$	
Rule 504			•	
•			\$	
Total		<u> </u>	\$	
I. a. Furnish a statement of all expenses in connection with the issuance and distrib solely to organization expenses of the issuer. The information may be given as su not known, furnish an estimate and check the box to the left of the estimate.	ution of the secution of the s	curities in this offering contingencies. If the	ng. Ex e amou	clude amounts relating int of an expenditure is
Transfer Agent's Fees	*********		\$	100
Printing and Engraving Costs	•••••		\$	
Legal Fees			\$	3,000
Accounting Fees	**********		\$	···
Engineering Fees		ā	\$	
Sales Commissions (specify finders' fees separately)		Ē	\$	
Other Expenses (identify)			2	
<u> </u>			Ψ	 -
Total			\$	3,100

(1) 10,000 warrants. Each warrant is exercisable for the purchase of one additional common share at an exercise price of \$0.75 CDN for a period of 2 years, expiring on August 29, 2010.

	C. OFFERING PRIC	CE, NUMBER OF INVESTORS, EXF	ENSES	AND USE OF PROCEE	DS	
	Question 1 and total expenses furnish	ggregate offering price given in respons ed in response to Part C Question 4.a. suer."	This diff	erence is	5	514,400
5.	Indicate below the amount of the adjusted g each of the purposes shown. If the amount check the box to the left of the estimate. It proceeds to the issuer set forth in response to	nt for any purpose is not known, furni The total of payments listed must equal	sh an est:	imate and		
				Payments to Officers, Directors & Affiliates		Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		<u> </u>
	Purchase, rental or leasing and install	ation of machinery and equipment		\$		\$
	Construction or leasing of plant build	ings and facilities		\$		\$
	Acquisition of other businesses (incluing this offering that may be used in exanother issuer pursuant to a merger)	change for the assets or securities of				
	Repayment of indebtedness			\$		
	Working Capital			\$	\boxtimes	\$
	• •			\$		\$14,400 \$
	Column Totals			\$ \$	\boxtimes	\$14,400
	Total Payments Listed (column totals			\$ \$	\boxtimes	\$14,400
	· · · · · · · · · · · · · · · · · · ·				. —	<u> </u>
		D. FEDERAL SIGNATU	RE			
sig	e issuer has duly caused this notice to be signature constitutes an undertaking by the issuer to any non-a	uer to furnish to the U.S. Securities and	i Exchan	ge Commission, upon wr	der Rul itten re	le 505, the following quest of its staff, the
Iss	uer (Print or Type)	Signature		Date		
Ca	rbon Friendly Solutions Inc.	804		September 9, 2008		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type				_
Sta	an Lis	Director and President				
				•		
	·					
				•		
	Intentional misstatements o	r omissions of fact constitute federal	criminal	violations. (See 18 U.S.	C. 1001	

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such view No

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

lssuer (Print or Type) Carbon Friendly Solutions Inc.	Signature	Date September 9, 2008	·
Name of Signer (Print or Type)	Title of Signer (Print or Type	I	
Stan Lis	Director and President		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures

APPENDIX

1	to non-	d to sell accredited ors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount p	of investor and urchased in State rt C-Item 2)		Disquali under Sta (if yes explant waiver ((Part E-	ification te ULOE , attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non Accredited Investors	Amount	Yes	No
AL		XX							
AK		XX							
AZ		xx							
AR		XX	·						
CA		xx							
СО		xx	\$10,000 - units consisting of common shares and common share purchase warrants	1	\$10,000	0	\$0		
СТ		XX							
DE		XX							
DC		XX							
FL		XX							
GA		XX							
HI		XX			1				
lD		XX							
IL		XX							
IN		XX							
IA		XX							
KS		XX							
KY		XX							
LA		XX							
ME		XX							
MD		XX							1
MA		XX							
MI		XX ·							
MN		XX-							
MS		XX		•					
МО		xx							1
MT		xx							† •
NE		xx							
NV		xx							
NH		xx	-						
NJ		xx							
NM		xx	<u> </u>	-					
NY		xx							
NC		XX	-						

APPENDIX

1	to non- investo	ad to sell accredited ors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under-State ULOE -(if-yes, attach explanation-of waiver-granted) (Part E-Item-1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non Accredited Investors	Amount	Yes	No	
ND		XX								
ОН		XX								
ОК		XX								
OR		XX								
PA		XX								
RI		XX								
SC		XX							l	
SD		XX			·					
TN		XX	·							
TX		XX								
UT		XX								
VT		XX								
VA		XX								
WA		XX			•		· · · · · · · · · · · · · · · · · · ·			
WV		XX				1				
WI	•	XX								
WY		XX								
PR		XX							1	

